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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/659,881
Filing Date	09/11/2003
First Named Inventor	YOEL WAZANA
Art Unit	1725
Examiner Name	EI VE, MARIA ALEXNADRA
Attorney Docket Number	28179-7 FORMERLY 21101-0006

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint the practitioners associated with the Customer Number: 33417

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Yoel Wazana</i>		
Name	YOEL WAZANA		
Date	JANUARY 8, 2007	Telephone	818-407-7500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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